

SERIAL NO. FILING DATE 492 APPLICANT(S) MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AFTER AFTER 1st AMENDMENT 2nd AMENDMENT AS FILED IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. IND. DEP. iO1 1 51 j02 52 103 1 53 104 1 54 105 1 55 06 1 56 707 157 108 | 58 100 159 160 111 1 61 112 (62 [63 14 64 115 1 65 116 66 1 17 67 1 18 68 119 l 69 1 20 l 70 121 171 1 22 172 23 [73 124 174 125 175 126 76 127 177 128 178 129 179 130 80 131 81 132 82 133 <u> 1</u> 83 134 84 135 85 136 Į 86 137 (87 | 38 188 | 39 89 140 (90 1 91 (42 (92 1 93 43 144 194 145 195 196 46 197 147 1 98 £48 199 [49 150 300 TOTAL TOTAL TOTAL DEP. 36 TOTAL DEP. TOTAL 38 TOTAL CLAIMS